CITY OF NORMAN SUPPLEMENTAL QUESTIONNAIRE DEPUTY MARSHAL (Municipal Court)

N	Name:	Date:
		Phone Number:
Ma		e used for further evaluation of your education, training, and experience as it relates to the Deputy QUESTIONNAIRE COMPLETELY EVEN IF THIS INFORMATION IS ON YOUR
1.	. Do you have a degree from a four-year accred	ited college or university?YesNo
2.	2. Are you currently attending law school?	Yes No
2.	2. The selected applicant for this position will be any reason why you wouldn't be able to serve	e serving processes and must have his/her own transportation. Is there processes?YesNo
3.	3. Do you have a valid driver's license and satisf	factory motor vehicle record?YesNo
4.	` ,	ately fifteen (15) hours per week. be spent in the Municipal Courtroom. ay, and Thursday afternoons, beginning at 2:30 p.m.)
	Five (5) hours will b	e spent serving processes. (No set schedule)
	Would you have any problems working TuesdYesNo	lay, Wednesday, and Thursday afternoons beginning at 2:30 p.m.?
	What is your school schedule for the Fall/Spri	ng semester?
5.	5. What education, training, or experience do yo	u have that would relate to this position?
6.	 List any other information, including personal this position. 	strengths, that you feel will aid us in determining your qualifications for